



MALARIA OUTBREAK IN LIMPOPO PROVINCE THREATENS TO AFFECT MORE AREAS

After the recent heavy rains the Limpopo Province has reported several malaria cases.

It is feared that the upsurge might spread to the malaria risk areas of Mpumalanga and KwaZulu-Natal. The two provinces have had their share of heavy rainfall.

The Director Environmental Health, Col H.S. Venter, has warned the Department of Defence personnel stationed or deployed in or visiting malaria risk areas to take note of the dangers associated with malaria, and the actions to be taken to prevent the disease.

WHAT IS MALARIA?

Malaria is one of the most serious tropical diseases in the world. The disease can be fatal if not diagnosed and treated at an early stage. A parasite of the genus Plasmodium, which

requires two different hosts during its cycle, namely human, and mosquito cause malaria.

The bite of an infected mosquito of the genus Anopheles transmits the parasite from human to human.

The mosquito sucks blood from the infected person, taking in the parasites, which then continue their life cycle in the mosquito. When the infected mosquito bites another human, the parasites pass into the person along with the insect's saliva.

WHAT IS THE EFFECT ON HUMANS?

Once inside the human body, the parasites move to the liver where they develop. After becoming mature they re-enter the bloodstream where they invade and multiply inside the red blood cells. These red blood cells eventually burst, releasing the

parasites back into the bloodstream from where they repeat the cycle by invading other red blood cells. The bursting of the infected red blood cells results in the characteristic chills, fever and sweating associated with malaria. Subsequently anaemia, an enlarged spleen, kidney failure and congestion of the blood vessels in the brain may develop.

The following are the A, B,D,E rules of malaria prevention:

A: Awareness of malaria risk

- Constant awareness of the risk and dangers of malaria. The bite of an infected mosquito of the genus Anopheles transmits the parasite from human to human.





Bulletin

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B: Avoidance of mosquito bites

- Take precautionary measures to prevent mosquito bites.
- If possible, remain indoors between dusk and dawn (malaria mosquitoes bite at night).
- Wear long-sleeved clothing, long trousers and socks when going out at night.
- Apply an insect repellent to the exposed skin at night.
- Sleep under a mosquito-proof insecticide-treated net.
- Spray inside accommodation with an insecticide spray, after closing the windows and doors.

C: Compliance- take your prophylaxis (preventative medication) correctly

- Take the prescribed prophylaxis.
- Start before entering the malaria risk area.
- Take the prophylaxis at the same time every day (or weekly, for weekly prophylaxis) with plenty of water.
- Continue while in the area and for 4 weeks after leaving the area.

D: Early detection of Malaria

- The majority of deaths and cases of complicated malaria result from delayed diagnosis and/or inappropriate treatment.

- Seek immediate medical attention if you have any flu-like symptoms, eg fever, headache, chills, muscular pain, for up to six months after leaving the area.
- Confirmation of malaria as a cause of illness is made by the examination of blood for parasites, either by a blood smear or rapid malaria test.

E: Effective treatment

- Malaria must be treated as a medical emergency. The sooner effective treatment is started the better the prognosis.

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